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## BIB DATA SHEET

CONFIRMATION NO. 1487

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/800,909	03/15/2004	623	3774	31132.240		
<b>RULE</b>						
<b>APPLICANTS</b> William Sears, St. Leonards, AUSTRALIA; Randall Allard, Germantown, TN; Hai Trieu, Cordova, TN; Frank Bono, Collierville, TN;						
<b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 05/29/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/ANN SCHILLINGER/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> AUSTRALIA	<b>SHEETS DRAWINGS</b> 9	<b>TOTAL CLAIMS</b> 26	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> Warsaw Orthopedic, Inc. Noreen Johnson - IP Legal Department 2600 Sofamor Danek Drive Memphis, TN 38132 UNITED STATES						
<b>TITLE</b> System and method for stabilizing a prosthetic device						
<b>FILING FEE RECEIVED</b> 1438	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		